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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>TMS</i> Examiner's Signature _____ Initials _____ | STATE OR COUNTRY MN | SHEETS DRAWING 6 | TOTAL CLAIMS 19 | INDEPENDENT CLAIMS 2 |
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